



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Albert Man et al.

Title: SYSTEM FOR TESTING DEVICES AND METHOD THEREOF

App. No.: 09/994,261

Filed: 11/26/2001

Examiner: David Ton

Group Art Unit: 2133

Customer No.: 34456

Confirmation No.: 8626

Atty. Dkt. No.: 1376-0100660

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RESPONSE TO OFFICE ACTION

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In response to the Office Action mailed February 24, 2004, please amend the above-identified application as follows:

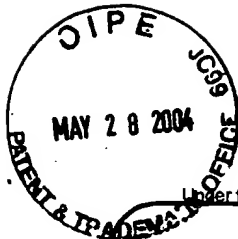
Specification Amendments begin on page 2.

Claim Amendments begin on page 3.

Remarks begin on page 8.

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<u>Katrina Prati</u>	<u>Katrina Prati</u>
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/994,261	
	Filing Date	11-26-2001	
	First Named Inventor	Albert Man	
	Art Unit	2133	
	Examiner Name	David Ton	
Total Number of Pages in This Submission	13	Attorney Docket Number	1376-0100660

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Ryan S. Davidson, Reg. No. 51,596
Signature	
Date	May 24, 2004

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Signature		Date	5-24-04

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